

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	<i>JL</i>		<i>10/3/10</i>
<b>O.I.P.E. CLASSIFIER</b>	<i>DR</i>	<i>32</i>	<i>10/10</i>
<b>FORMALITY REVIEW</b>	<i>HA</i>	<i>858</i>	<i>11-08-00</i>
<b>RESPONSE FORMALITY REVIEW</b>	<i>SS</i>	<i>573</i>	<i>04-23-01</i>

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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